



WPRF RENTAL CHANGE FORM

Permit holder Information (please print):

Permit Holder Name: _____ Original Permit Date: _____
Permit Number: _____ Original Permit Location: _____
Contact Phone (between 8-4): _____ Original Permit Time: _____
Email Address: _____

Change requested:

☒ Please check: ☐ Date ☐ Time ☐ Location ☐ Adding WPRF to Clean

New Date: _____

New Time: _____

New Location: _____

If your rental requires an additional pre-payment or change fee, please include payment.

Payment Information:

☒ Please check one: ☐ Cash ☐ Check ☐ Visa ☐ MasterCard

Payment Amt. \$ _____

Credit Card Number _____ Exp. Date _____ CSC Code _____

Authorized Signature _____

I understand only the first change to my permit is no charge. I agree to the additional charges (if any) incurred with the change to my existing permit. All changes made within 7 days of event are an additional \$25.

Signature _____ Date: _____

Office Use Only: Check Amendment Log

Additional Fee \$ _____ ☐ 1st change ☐ 2nd change (or more) Employee Initials _____